

In re GERARD S. LAZZARA, JR,  
DebtorCase No. 09-33361-H1-11  
(if known)**SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)**

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form22A or 22C.

Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

1. Rent or home mortgage payment (include lot rented for mobile home)	\$ _____
a. Are real estate taxes included? Yes _____ No <input checked="" type="checkbox"/>	
b. Is property insurance included? Yes _____ No <input checked="" type="checkbox"/>	
2. Utilities: a. Electricity and heating fuel	\$ 850.00
b. Water and sewer	\$ 127.00
c. Telephone	\$ 166.00
d. Other <u>CABLE</u>	\$ 214.00
3. Home maintenance (repairs and upkeep)	\$ 150.00
4. Food	\$ 400.00
5. Clothing	\$ 250.00
6. Laundry and dry cleaning	\$ _____
7. Medical and dental expenses	\$ 1,200.00
8. Transportation (not including car payments)	\$ _____
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$ 200.00
10. Charitable contributions	\$ _____
11. Insurance (not deducted from wages or included in home mortgage payments)	
a. Homeowner's or renter's	\$ 270.50
b. Life	\$ _____
c. Health	\$ _____
d. Auto	\$ _____
e. Other _____	\$ _____
12. Taxes (not deducted from wages or included in home mortgage payments) (Specify) <u>Property 9150/yr; Federal taxes 15000/yr (addl to deductions)</u>	\$ 2,012.50
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan)	
a. Auto	\$ _____
b. Other _____	\$ _____
c. Other _____	\$ _____
14. Alimony, maintenance, and support paid to others	\$ _____
15. Payments for support of additional dependents not living at your home	\$ _____
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$ _____
17. Other _____	\$ _____
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)	\$ <u>5,840.00</u>
19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document:	
20. STATEMENT OF MONTHLY NET INCOME	
a. Average monthly income from Line 15 of Schedule I	\$ 5,175.00
b. Average monthly expenses from Line 18 above	\$ 5,840.00
c. Monthly net income (a. minus b.)	\$ -665.00

NOTE RE ATTACHED MARKED COPIES. See attached copies marked to show revisions to Schedule J. Changes to the prior Schedule are shown by "strikeout" text on Markup Attachment J-1, which is a copy of the previously filed Schedule. Additions reflected in this Schedule that were not included in the prior Schedule are shown by "underline" text on Markup Attachment J-2, which is a copy of this Schedule showing the additions.

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b. Is property insurance included? Yes _____ No _____	\$ _____
2. Utilities: a. Electricity and heating fuel	\$ <u>850.00</u>
b. Water and sewer	\$ <u>127.00</u>
c. Telephone	\$ <u>166.00</u>
d. Other <u>Cable</u>	\$ <u>214.00</u>
3. Home maintenance (repairs and upkeep)	\$ <u>150.00</u>
4. Food	\$ <u>400.00</u>
5. Clothing	\$ <u>250.00</u>
6. Laundry and dry cleaning	\$ _____
7. Medical and dental expenses	\$ <u>1,200.00</u>
8. Transportation (not including car payments)	\$ _____
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$ <u>200.00</u>
10. Charitable contributions	\$ _____
11. Insurance (not deducted from wages or included in home mortgage payments)	\$ _____
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13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan)	\$ _____
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17. Other _____	\$ _____
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)	<u><b>\$ 5,839.50</b></u>
19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document:	\$ _____
20. STATEMENT OF MONTHLY NET INCOME	\$ _____
a. Average monthly income from Line 15 of Schedule I	\$ <u>4,988.00</u>
b. Average monthly expenses from Line 18 above	\$ <u>5,839.50</u>
c. Monthly net income (a. minus b.)	\$ <u>-851.50</u>

B6J (Official Form 6J) (12/07)  
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